INPUTS

Direct Funding

CDC NYS DOE.

In-kind Funding

 Three comprehensive health coordinators (CHCs) (partial work on HIV/AIDS/STIs)

Staffing

- DOE/OSH/HEU project director
- Three CHCs
- One part-time consultant

Partner Organizations

- NYC DOH/MH
- NY Academy of Medicine
- NYS DOE
- NYS DOH
- ■Various DOE depts.-Teaching and Learning,

Fitness, Substance Abuse
Programs, Prevention and
Intervention Programs,
Guidance, and Parent
Coordinators

 Various CBOs - Love Heals, Friends Indeed

Technical Assistance

AED and CDC NYC DOH/MH NYS DOE

Policies

NYC OSH/HEU has been working with the NYS DOE and DOH and the CDC to promote skillsbased/authentic

assessment-based, health education in their two primary curricula (CSHE and HIV/AIDS).

Tools

NYC has its own HIV/AIDS Curriculum for grades K-12; a factual update is currently under consideration for approval.

New York City HIV Logic Model*

ACTIVITIES

Training

- 1. Conduct skills-based HIV/AIDS/STI training to CHC staff.
- 2. Trained CHC staff conduct skills-based HIV/AIDS/STI training to HS teachers, RHDs, and HS administrators.
- 3. Conduct health trainings for non-licensed health educators on comprehensive school health education (CSHE) and HIV/AIDS/STI education.

Technical Assistance

- 1. Review HIV/AIDS Plans in NYC HSs;
- Meet with RHDs to review HIV/AIDS plans.
 Prioritize HSs in need
- Prioritize HSs in need of TA.
- 4. Provide TA to teachers

Collaboration with Stakeholders

- 1. Conduct meetings with DOE/OSH/HEU, RHDs, and HS health education staff
- 2. Conduct site visits to HSs with DOE/OSH/HEU and RHDs.

Resource Development

- 1. Create HIV/AIDS
- Update newsletter
- 2. Publish newsletter3. Distribute newsletter
- Distribute newsletter
 Award BASE grants to
 HSs for peer education projects.

OUTPUTS

Training

- Five CHC staff trained.

 Indicator: 6
- 2. Cadre of 50% of RHDs, 50 HS administrative personnel, and 75 teachers trained to provide CSHE and HIV/AIDS/STI education.

Indicator: 6

3. Cadre of 100 nonlicensed health educators trained.

Indicator: 6

Technical Assistance

 A prioritized list of HSs that need TA.

Indicators: 3 and 7

Collaboration with Stakeholders

1. Shared resources and information on HIV/AIDS policies and programs.

Indicator: 1,4,12

Resource Development

1. 12 newsletters
 distributed to trainees.

Indicator: 4, 25

2. At least 50 HSs have HIV/AIDS/STI prevention peer education projects.

Indicator: 25

3. At least 200 HS students prepared to provide peer education. *Indicator: 25*

■Pre- and post-training

- assessment
 Indicators for School
 Health Programs
- ■Training sign-in sheets
- Copies of resources and policies

SHORT-TERM EFFECTS & OUTCOMES

Training and Technical Assistance

- Increased number of schools implementing and infusing HIV/AIDS/STI education.
- 2. Increased knowledge of HIV/AIDS/STI prevention among teachers and nonlicensed health educators.
- 3. Increased ability of teachers and health educators to provide instruction in HIV/AIDS/STI prevention.
- 4. Increased number of HSs aware of the need to incorporate mandatory HIV/AIDS/STI policies and programs into the CSHE curriculum.

Collaboration with Stakeholders

1.More schools have policies and programs for HIV/AIDS/STI education.

Resource Development

- More students participate in HIV/AIDS/STI prevention peer education projects.
- 2. Increased number of schools have peer educators.

School Health

assessment

Education Profiles

■School Health Policies

and Programs Survey

■Pre- and post training

INTERMEDIATE EFFECTS & OUTCOMES

Training and Technical Assistance

- 1. Increased number of students educated on HIV/AIDS/STI prevention.
- 2. Increased number of HSs incorporating HIV/AIDS/STI policies and programs into the CSHE curriculum.

Collaboration with Stakeholders

1. Consistent approach to HIV/AIDS/STI education in the NYC school district.

Resource

Development 1. Increase in students'

knowledge and awareness of HIV/AIDS/STI prevention

LONG-TERM EFFECTS & OUTCOMES

Strengthen CSHE programs

- 1. HIV/AIDS/STI prevention information is incorporated into the CSHE curriculum in the NYC school district..
- 2. Reduce the level of reported HIV/AIDS and STIs among males and females aged 15-19.

Goal

Improve the health, education, and well-being of young people through coordinated school health programs.

Data source to document accomplishment

